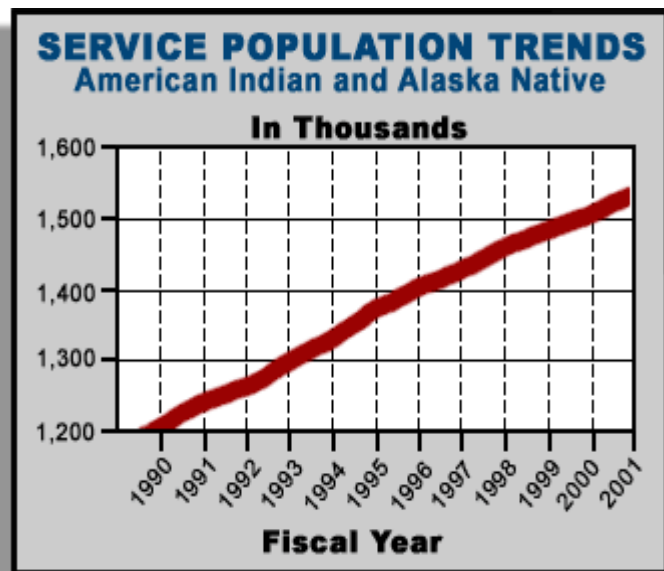


ISSUE

The 1997-1999 Current Population Survey (CPS) revealed that the Indian population has larger families, less health insurance, and lower household median incomes than the general population. The CPS also reveals that Indians live in poverty at a level nearly three times that of the rest of the population.



BACKGROUND

Between 1990 and 2006, the U.S. American Indian and Alaska Native population increased by 65%, from 2.0 to 3.3 million (*American Indian and Alaska Native alone; bridged 2000 census*). The Indian Health Service (IHS) service area population comprises 56% of the U.S. Indian population. The IHS service population increases at a rate of approximately 1.8% per year. This further taxes a system already challenged to meet even 60% of the health needs of Indian country.

The increase in the IHS service population is the result of natural increase (births minus deaths) and the expansion of the IHS service delivery area, as the additional Tribes receive federal recognition.

The 1990 Census showed that 56% of the Indian population resides in urban areas. The remaining

44% of the Indian population resides in rural areas.

SITUATION

When compared to the U.S. All Races, the American Indian and Alaska Native population lags behind in several areas. The 2000 Census data reveal that Indians have lower educational levels and higher unemployment rates. The American Indian and Alaska Native population is a young population. The median age of the Indian population is 28 years, compared to 35 years for the U.S. All Races. The Indian population served by the IHS is living longer than it did 30 or even 20 years ago. Statistics on age at death show that during 1972-1974, life expectancy at birth for the Indian population was 63.6 years. Life expectancy has now increased to 74.5 years (1999-2001)¹. Diseases of the heart, malignant neoplasm, unintentional injuries, diabetes mellitus, and cerebrovascular disease are the five leading causes of Indian deaths (2000-2002).

OPTIONS/PLANS

The IHS will continue to monitor the health status of the population for which IHS, Tribal, and Urban Indian health priorities are identified. The IHS patient care data, vital event (birth and death) data from the National Center for Health Statistics, and 2000 Census data will be used to monitor health status and to publish reports. These demographic and socio-economic statistical data will be used to develop and coordinate various health and socio-economic partnerships.

ADDITIONAL INFORMATION

For referral to the appropriate spokesperson, contact the IHS Public Affairs Staff at 301-443-3593.

^{1/} Life expectancy has not been adjusted to compensate for misreporting of AI/AN race on state death certificates.